

This issue of the Diabetes Quality Care Monitoring System – Quality Improvement Report (DQCMS-QIR) highlights information about influenza and pneumococcal immunizations, including step-by-step instructions on how to use DQCMS to send recall/reminder letters.

PAGE

- 1 Prevention and Control of Influenza
- 2 Diabetes Care Data
- 3 How to run immunization reminder/recall letters in DQCMS
- 4 Resources

Prevention and Control of Influenza

Influenza and pneumonia are the fifth leading cause of death in persons aged 65 and older in the United States (U.S.). Influenza kills an average of 36,000 persons and hospitalizes over 114,000 in the U.S. annually.¹ It is not too early to begin thinking about immunizations.

The primary option for reducing the effects of influenza is immunization. Health care workers (HCW) are an important but often neglected group needing to be immunized against influenza. Vaccination of HCW and other persons in close contact with persons at increased risk for severe influenza illness can reduce transmission rates and subsequent influenza-related complications. Immunizing HCW is an important infection control and patient safety issue. Yet influenza immunization rates nationally are well below the Healthy People 2010 (HP 2010) objectives.

According to the 2002 National Health Interview Survey, only 38% of health care workers were immunized. (Table)

Table: Influenza vaccination coverage rates among adult target populations—U.S. National Health Interview Survey, 2002.

Population (Aged)	Flu Vacc Rated (%)	HP 2010 Obj. (%)
HCW (all)	38	*
General Pop		
50-64 years	34	60
≥ 65 years	66	90
Persons at high risk		
18-49 years	23	60
50-64 years	44	60

*No objective has been set for HCW.

The Advisory Committee on Immunization Practices (ACIP) recommends annual influenza immunizations for HCW². The current ACIP recommendations include:

- Healthy children aged 6–23 months and close contacts of children aged 0-23 months be vaccinated against influenza.
- Inactivated vaccine is preferred over live, attenuated influenza vaccine for immunizing health care workers. If a health care worker receives the live, attenuated vaccine, they should refrain from contact with severely immunosuppressed patients for seven days after vaccine receipt.
- Severely immunosuppressed persons should not administer live, attenuated vaccine.
- Persons with chronic illnesses should receive the influenza immunization annually.

The National Foundation for Infectious Diseases has initiated a “Call to Action” in order to improve influenza vaccination rates among HCW. Health care workers can and do spread the highly contagious virus to patients they come in contact with. This is particularly troubling for the many unsuspecting high-risk patients who have chronic debilitating diseases that place them at high risk for influenza related complications, hospitalizations and death. These patients rely on HCW to help protect them, not infect them!

In addition, clinics that offer easy access to influenza vaccine may experience cost-effective benefits including:

- less absenteeism,
- less overtime to replace sick workers;
- avoiding errors in patient care that may occur when staff is tired.

Be proactive – work diligently to ensure people are assessed for their immunization status. Immunize against influenza and pneumococcal disease. Also, do not forget to immunize **all** the office staff!

1. Thompson WW, et al. Mortality associated with influenza and respiratory syncytial virus in the U.S., JAMA 2003;289:179-86.

2. Prevention and Control of Influenza, MMWR, May 28, 2004/53(RR06);1-40. (www.cdc.gov/mmwr/preview/mmwrhtml/rr5306a1.htm).

FIGURE 1: PHYSICIAN OFFICES PARTICIPATING IN THE DIABETES QUALITY CARE MONITORING SYSTEM (DQCMS) PROJECT, October 2005 (n=29)

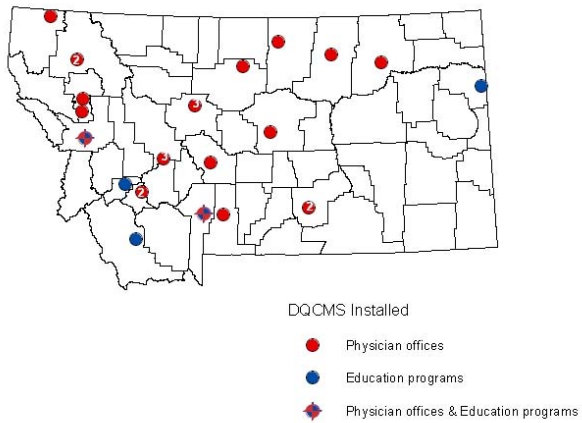


FIGURE 2:

GENERATING VACCINATION LETTERS FROM DQCMS

Flu season is approaching quickly. You have the capability to send out personalized letters to your high-risk patients with diabetes encouraging them to come in for an influenza and/or pneumococcal immunization. DQCMS has preprogrammed vaccination letters. On page 3 of this issue of the QIR, there is a step-by-step procedure for generating vaccination letters. There are four vaccination letters to choose from, and you can generate letters based on your needs. The population identified in DQCMS for each letter is as follows:

Flu – this function identifies patients in DQCMS who need a flu shot for the current (10/1/xx –3/31/xx) flu season but who have already received a pneumococcal shot.

Pneumococcal – this function identifies patients in DQCMS who have no documentation that they have had the pneumococcal shot but who have already received a flu shot for the current flu season.

Flu/Pneumococcal – this function identifies patients in DQCMS who need **BOTH** a flu shot for the current flu season and a pneumococcal shot.

Vaccination clinic – this function identifies patients in DQCMS who need **BOTH** a flu shot for the current flu season and a pneumococcal shot. It allows the clinic to identify dates and times for special vaccination clinics that you may plan.

Follow the same steps (see page 3) for EACH letter. **If you want to send a letter to all of your patients in DQCMS that need flu shots for the current season, you would need to do a flu letter and flu/pneumococcal letter.**

Using DQCMS: To prepare immunization recall/reminder letters

Vaccination Letters

The screenshot shows the DQCMSv1.4 interface. A red box labeled '1' points to the 'Letters' menu item. A red box labeled '2' points to the 'Vaccination Letters' sub-menu item, which is circled in red. The main window displays patient information for 'ALOT, M04' and various clinical data fields. The 'Letters' menu is open, showing options: 'ABC Letter', 'Vaccination Letters', 'Flu', 'Pneumococcal', 'Flu and Pneumococcal', and 'Vaccination Clinic'. The 'Vaccination Letters' option is highlighted.

Diabetes Quality Care Monitoring System (DQCMSv1.4)

File Current Reports Letters Maintenance Utilities Window Help

Patient: ALOT, M04 ABC Letter d Rec # 10000 Sex F Age 58 Physician PLANT, RUBBER

Vaccination Letters

Most Recent Data Summary Test Results

Office Visit 07/26/04

Clinical Exam

Weight 07/26/04

Height 10/10/03 ft 65 in

Blood Pressure 07/26/04 126 / 80 mmHg

Foot Exam 07/26/04 Type Monofilament Risk High Active Prob. No Recommend

Eye and Dental Exams

Dilated Eye Exam 12/01/03 Result No Retinopathy

Eye Exam Referral

Dental Exam Referral

Laboratory Data

A1C 05/01/04 10.0 %

Lipid Panel 10/10/03 HDL 45 mg/dl LDL 100 mg/dl Triglyceride 100 mg/dl

Proteinuria 10/10/03 +/-

Microalbuminuria 10/10/03 +/-

Immunization Status

Influenza 10/10/03 declined

Pneumo 10/10/03 declined

Prevention Services

Tobacco Use 10/10/03 Current No Intervention

Diabetes Education 10/10/03

Medications 10/10/03

Save and Refresh

Cancel Changes

Exit

Select a Patient

FLTR NUM

start

Inbox - Microso...

Document1 - Mi...

Draft Summer Q...

Diabetes Qualit...

7:11 AM

Preview of Flu/Pneumococcal letter

The screenshot displays the 'Diabetes Quality Care Monitoring System (DQCMSv1.4)' interface. A 'FLU / PNEUMOCOCCAL TEMPLATE' window is open, allowing customization of a letter. The window includes a 'Physician' dropdown menu (labeled 6) and a 'Signature' field. A 'Labels' dropdown menu (labeled 12) is located in the top right corner. The main text area contains a letter template with a placeholder for a phone number (labeled 5). A 'View Letter' button (labeled 8) is at the bottom right. The background shows the DQCMS interface with patient information and various tabs.

Stratifying letters:

6. If you want to select specific clinicians, go to the “**Physician**” box and click the drop down arrow, then select the clinician you want – this will **ONLY** produce letters for this clinician’s patients.
7. If you want to send letters to **all** of the patients in the DQCMS system leave the “**Physician**” box blank.

Generating the Letter:

8. Click on “**View Letter**”. DQCMS will automatically merge those patients who need the requested service into the letter.
9. When you click “**View Letter**” you should see the patient names and addresses merged into the letter. Now go to “**File**”. Then go to “**Page setup**”. Now you can change the margins so the letter will fit onto your letterhead.

Printing the letters:

10. Load the printer with your letterhead.
11. Go to “**File**” then “**Print**”.

Printing Labels:

12. After printing the vaccination letters, go to “**Labels**”.
13. Highlight the size of labels you need (e.g., 5160) from the drop down box.
14. Once you select the size of labels, you will have a screen showing the label format.
15. Go to “**File**” and “**Print**”. Be sure to put labels into your printer before printing.



**“Let us love winter, for
it is the spring of
genius.” ~Pietro Aretino**



**~ A Red Carpet Welcome to the new DQCMS site:
⇒ Daniels Memorial Clinic, Scobey, Montana**

SAVE THE DATE

**WHAT: Cardiovascular Health
Summitt**

WHEN: April 7th, 2006

**WHERE: Grouse Mountain
Lodge, Whitefish, MT**

(Call 406-444-5508 for more information)

**Home Page for
Montana Diabetes Project**

<http://ahec.msu.montana.edu/diabetes>

What's available on the website?

- Children with Diabetes: A Resource Guide for Schools
- Diabetes Surveillance Reports
- Resource Library
- Information on Acanthosis Nigricans
- Upcoming conferences and continuing education

~Montana Diabetes Project (MDP) Staff~

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